Fill in this information to identify your case	se:	
United States Bankruptcy Court for the: Northern	District of Ohio	
Case number(If known)	Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13	Check if this is an amended filing

Voluntary Petition for Individuals Filing for Bankruptcy

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The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1:	Identify Yourself		
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your	full name		
		the name that is on your nent-issued picture	Joel	
	identifi	cation (for example, your s license or passport).	First name Junior	First name
	Bring y	your picture cation to your meeting	Middle name	Middle name
		e trustee.	Muniz Last name	Last name
			<u>Jr.</u> Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
	All of	her names you have		
2.		in the last 8 years	First name	First name
		e your married or n names.	Middle name	Middle
			Middle name	Middle name
			Last name	Last name
			First name	First name
			Middle name	Middle name
			Last name	Last name
3.	Only	the last 4 digits of		
	your \$	Social Security per or federal	$xxx - xx - \underline{4} \underline{0} \underline{7} \underline{4}$ OR	XXX - XX OR
	Indivi	dual Taxpayer	9 xx - xx	9 xx - xx
	Identi (ITIN)	fication number	-	• ^

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

De	btor 1	Joel First Name	Junior Middle Name	Muniz Jr. Last Name		Case number (if known		
		riist ivaine	Middle Name	Last Name				
			About Debtor 1:			About Debtor 2 (Spou	ise Only in a Joint	Case):
4.	Employ Numbe	siness names an ver Identification rs (EIN) you have the last 8 years	I have not us	ed any business names o	r EINs.	☐ I have not used an	ny business names	or EINs.
		rade names and siness as names	Business name			Business name		
			Business name			Business name		
			_ EIN			_ EIN		
			EIN			EIN		
5.	Where	you live				If Debtor 2 lives at a c	lifferent address:	
			1243 Ottaw Number Street	a Ave.		Number Street		
			Defiance City	OH State	43512 ZIP Code	City	State	ZIP Code
			<u>Defiance</u> County			County		
			above, fill it in he	dress is different from re. Note that the court wi at this mailing address.	the one Il send	If Debtor 2's mailing a one above, fill it in he send any notices to you	ere. Note that the co	urt will
			Number Street			Number Street		
			City	State	ZIP Code	City	State	ZIP Code
6.		u are choosing	Check one:			Check one:		
	this dis bankru	etrict to file for ptcy		80 days before filing this is district longer than in a		Over the last 180 days have lived in this didistrict.	ays before filing this strict longer than in	
			I have another (See 28 U.S.C			☐ I have another reas (See 28 U.S.C. § 1		

7.	The chapter of the Bankruptcy Code you are								I.S.C. § 342(b) for Individuals ck the appropriate box.
	choosing to file under	×	Chap	ter 7					
			Chap	ter 11					
			Chap	ter 12					
			Chap	ter 13					
8.	How you will pay the fee	×	your fee y subn	local co ourself, nitting yo	urt for more de you may pay v	etails about how with cash, cash n your behalf, y	w y nier	ou may pay. Ty 's check, or mo	neck with the clerk's office in placely, if you are paying the oney order. If your attorney is pay with a credit card or
									ption, sign and attach the nents (Official Form 103A).
			Char if you and out the	oter 7. By ur incom you are i	y law, a judge e is less than f unable to pay t cation to Have	may, but is no 150% of the of the fee in insta	t re fici Illm	equired to, waive al poverty line the ents). If you ch	tion only if you are filing for e your fee, and may do so only hat applies to your family size oose this option, you must fill d (Official Form 103B) and file
9.	Have you filed for bankruptcy within the last 8 years?	×	No Yes.	District		Who	en		Case number
	o youro.								Case number
				District		Who	en	MM / DD / YYYY	Case number
								MM / DD / YYYY	
10	Are any bankruptcy cases pending or being filed by a spouse who is	×	No Yes.	Debtor					Relationship to you
	not filing this case with you, or by a business partner, or by an affiliate?			District		Who	en	MM / DD / YYYY	Case number, if known
				Debtor					Relationship to you
								MM / DD / YYYY	Case number, if known
11	.Do you rent your residence?	×	No. Yes.	_		ned an eviction ju	udg	ment against you	1?
					s. Fill out <i>Initial</i> s		ıt a	n Eviction Judgm	ent Against You (Form 101A) and file

Voluntary Petition for Individuals Filing for Bankruptcy

Del	otor 1		nior lle Name	Muniz Jr.	Case number (if known)
Do	ut 2.	•			to a
Pa	rt 3:	Report About Any Busin	iesses You Owr	1 as a Sole Proprieto	tor
12.		u a sole proprietor full- or part-time ss?	➤ No. Go to ☐ Yes. Name	Part 4. e and location of bus	usiness
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	of business, if any	
	LLC. If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.	Numb	er Street		
			City		State ZIP Code
			Chec	k the appropriate bo	oox to describe your business:
				Health Care Busines	ess (as defined in 11 U.S.C. § 101(27A))
				Single Asset Real E	Estate (as defined in 11 U.S.C. § 101(51B))
				Stockbroker (as defi	fined in 11 U.S.C. § 101(53A))
			_		(as defined in 11 U.S.C. § 101(6))
				None of the above	
Chapte Bankr		u filing under or 11 of the optcy Code and are omall business ?	can set appro most recent b if any of these	priate deadlines. If y alance sheet, staten documents do not	f, the court must know whether you are a small business debtor so that it you indicate that you are a small business debtor, you must attach your ment of operations, cash-flow statement, and federal income tax return or exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
		finition of s <i>mall</i> s <i>debtor</i> , see 11	■ No. Ia	m not filing under Cl	Chapter 11.
		101(51D).		m filing under Chapt the Bankruptcy Cod	oter 11, but I am NOT a small business debtor according to the definition de.
				m filing under Chapt nkruptcy Code.	oter 11 and I am a small business debtor according to the definition in the
Pa	rt 4:	Report if You Own or H	ave Any Hazard	ous Property or Any	y Property That Needs Immediate Attention
14.	proper	own or have any ty that poses or is I to pose a threat of ent and identifiable	No Yes. Wh	at is the hazard?	
	hazard safety? any pro	to public health or ? Or do you own operty that needs late attention?	16.		
	perishab that mus	mple, do you own ble goods, or livestock st be fed, or a building ds urgent repairs?	it im	imediate attention is	s needed, why is it needed?
			Whe	ere is the property?	Number Street
					City Code
					City State ZIP Code

Voluntary Petition for Individuals Filing for Bankruptcy

page 4

Debtor 1

Part 5:

Joel Junior Muniz Jr.

First Name Middle Name Last Name

.

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

 □ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about
credit counseling because of:

☐ Incapacity. I have a mental illness or a mental deficiency that makes me

incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me

to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

Case number (if known)

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

 □ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

credit counseling because of:

Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a

to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor 1 Case number (if known) Joel Junior Muniz Jr. Middle Name Last Name Part 6: Answer These Questions for Reporting Purposes 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) 16. What kind of debts do as "incurred by an individual primarily for a personal, family, or household purpose." you have? No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. 17. Are you filing under ■ No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Do you estimate that after Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and any exempt property is administrative expenses are paid that funds will be available to distribute to unsecured creditors? excluded and × No administrative expenses are paid that funds will be ☐ Yes available for distribution to unsecured creditors? 25,001-50,000 × 1.000-5.000 18. How many creditors do 1-49 you estimate that you 50-99 5,001-10,000 50,001-100,000 owe? 100-199 10,001-25,000 More than 100,000 200-999 19. How much do you □ \$1,000,001-\$10 million \$500,000,001-\$1 billion × \$0-\$50,000 estimate your assets to \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion be worth? п \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion 20. How much do you × \$500,000,001-\$1 billion \$0-\$50,000 \$1,000,001-\$10 million estimate your liabilities to \$10,000,001-\$50 million \$1,000,000,001-\$10 billion \$50,001-\$100,000 be? \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion Sign Below Part 7: I have examined this petition, and I declare under penalty of perjury that the information provided is true and For you correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11, 12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

Signature of Debtor 2

MM / DD / YYYY

Executed on

page 6

/S/ Joel Junior Muniz Jr Signature of Debtor 1

03/20/2019

MM / DD / YYYY

Executed on

Debtor 1	Joel	Junior	Muniz Jr.	Case number (if known)
	First Name	Middle Name	Last Name	<u>-</u>

For your attorney, if you are represented by one	I, the attorney for the debtor(s) named in this pe eligibility to proceed under Chapter 7, 11, 12, or relief available under each chapter for which the debtor(s) the notice required by 11 U.S.C. § 342 have no knowledge after an inquiry that the info	13 of title 11, United States e person is eligible. I also ce 2(b) and, in a case in which §	Code, and have explained the rtify that I have delivered to the 707(b)(4)(D) applies, certify that I
If you are not represented by an attorney, you do not need to file this page.	/S/ Jeffrey J. Horvath Signature of Attorney for Debtor	Date	03/20/2019 MM / DD / YYYY
	Jeffrey J. Horvath Printed name		
	Law Office of Jeffey J. Horvath Firm name 306 Clinton St.		
	Number Street		
	<u>Defiance</u> City	OH State	43512 ZIP Code
	Contact phone 419-782-0051	Email address	jeff@horvathlawoffice.com
	0073336 Bar number	Ohio State	_

Fill in this info	rmation to identify	your case:			
Debtor 1	Joel First Name	Junior Middle Name	MunizJr.		
Debtor 2	First Name	Middle Name	Last Name		
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States	Bankruptcy Court for	or the: Northern	District of Ohio		
Case number (If known)]	Check if this is an amended filing.

Official Form 106A/B

Schedule A/B Property

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In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

you own or have any legal or equitable intere	est in any residence, building, land, or similar pro	nerty?		
No. Go to Part 2.	st in any residence, banding, land, or similar pro	perty:		
· 1243 Ottawa Ave.	What is the property? Check all that apply. Single-family home Duplex or multi-unit building	Do not deduct secured claims or exemptions. Put the amount of any secured claims on <i>Schedule D: Creditors Who Have Claims Secured by Property.</i>		
Street address, if available, or other description	Condominium or cooperative Manufactured or mobile home Land	Current value of the entire property?	Current value of the portion you own?	
	Investment property	\$ 27,470.00	\$27,470.00	
Defiance OH 43512 City State ZIP Code	☐ Timeshare ☐ Other	Describe the nature interest (such as fee the entireties, or a life	simple, tenancy by	
	Who has an interest in the property? Check one.			
	Debtor 1 only	fee	e simple	
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Check if this is	community	
Defiance County	At least one of the debtors and another	property (see in	structions)	
	Other information you wish to add about this ite	em, such as local		
ou own or have more than one, list here:	what is the property? Check all that apply. Single-family home Duplex or multi-unit building	Do not deduct secured cl the amount of any secure D: Creditors Who Have C Property.	aims or exemptions. Put ad claims on <i>Schedule</i> Claims Secured by	
·	what is the property? Check all that apply. Single-family home	Do not deduct secured cl the amount of any secure D: Creditors Who Have C	aims or exemptions. Put ad claims on <i>Schedule</i> Claims Secured by	
·	what is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property	Do not deduct secured cl the amount of any secure D: Creditors Who Have C Property.	aims or exemptions. Pured claims on Schedule Claims Secured by	
·	what is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land	Do not deduct secured cl the amount of any secure D: Creditors Who Have C Property.	aims or exemptions. Pured claims on Schedule Claims Secured by Current value of the portion you own? \$	
Street address, if available, or other description	what is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare	Do not deduct secured of the amount of any secure D: Creditors Who Have O Property. Current value of the entire property? \$	aims or exemptions. Pued claims on Schedule Claims Secured by Current value of the portion you own? \$	
Street address, if available, or other description	what is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other	Do not deduct secured of the amount of any secure D: Creditors Who Have O Property. Current value of the entire property? \$	aims or exemptions. Pured claims on Schedule Claims Secured by Current value of the portion you own? \$ of your ownership simple, tenancy by ie estate), if known.	

Debtor 1	Joel First Name	Junior Middle Name	Muniz Jr. Last Name	Case number (if known)
1.3.	Street address, if available City County	e, or other description State ZIP Code	What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about property identification number:	Check if this is community property (see instructions)
			all of your entries from Part 1, including a r here.	any entries for pages \$ 27,470,00
Part 2:	Describe Your Vel	nicles		
vehicle Leases	s you own that someone	e else drives. If you lea	rest in any vehicles, whether they are regisse a vehicle, also report it on Schedule G: Exes, motorcycles	· · · · · · · · · · · · · · · · · · ·
3.1.	Make: Model: Year: Approximate mileage: Other information: Purchased for \$400	Mercury Mountaineer 1999 240000	Who has an interest in the property? Che Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property instructions)	the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Current value of the entire property? Current value of the portion you own?
If yo	ou own or have more that Make: Model: Year: Approximate mileage: Other information:	an one, describe here:	Who has an interest in the property? Che Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property instructions)	the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Current value of the entire property? Current value of the portion you own?

	JOEI First Name	Junior Middle Name	Muniz Jr. Case no Last Name	umber (if known)	
3.3.	Make: Model: Year: Approximate mileage: Other information:		Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)	Do not deduct secured claims or exenthe amount of any secured claims on Creditors Who Have Claims Secured Current value of the entire property? Current value of the portion you	Schedule D by Property alue of th
3.4.	Make: Model: Year: Approximate mileage: Other information:		Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Do not deduct secured claims or exenthe amount of any secured claims on Creditors Who Have Claims Secured Current value of the Current value property?	Schedule E by Property alue of the
			☐ Check if this is community property (see instructions)	\$ \$	
4.1.	Make: Model: Year: Other information:		Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see	the amount of any secured claims on Creditors Who Have Claims Secured Current value of the Current vientire property? portion yo	Schedule I by Property alue of th ou own?
If yo	u own or have more tha	n one, list here:	who has an interest in the property? Check one.	Do not deduct secured claims or exen the amount of any secured claims on	
4.2.	Model: Year:		☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Creditors Who Have Claims Secured Current value of the Current value of the portion you	Schedule E by Property alue of th

Debtor 1

Joel	Junior	Muniz Jr.	Case number (if known)
First Name	Middle Name	Last Name	

Pa	Describe Your Personal and Household Items	
Do	o you own or have any legal or equitable interest in any of the following items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
6.	Household goods and furnishings	
	Examples: Major appliances, furniture, linens, china, kitchenware	
	□.No ■ .Yes. Describe Household furniture, furnishings, appliances, linens, and kitchenware	\$1,200.00
7.	Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games	_
	□.No ☑.Yes. Describe Televisions, radios, cell phone, computer and miscellaneous electronic devices	\$\$
8.	Collectibles of value	_
	Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles	
	☑Yes. Describe	\$
9.	Equipment for sports and hobbies	
	Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments	
	☑Yes. Describe	\$
10	Examples: Pistols, rifles, shotguns, ammunition, and related equipment	_
	□Yes. Describe	\$
11	. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories	
	L.No ✓ Clothing and personal attire	\$
12	2. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver	
	☑No □Yes. Describe	\$
13	8. Non-farm animals Examples: Dogs, cats, birds, horses	_
	☐Yes. Describe	\$
14	Any other personal and household items you did not already list, including any health aids you did not list	
	☑No □Yes. Describe	\$
15	. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here	\$ 2,600.00
	attacheu ioi Fait 3. White that number here	- L
Of	ficial Form 106A/B Schedule A/B: Property	page 4

Debtor 1 J	oel	Junior	Muniz Jr.	Case number (if known)	
------------	-----	--------	-----------	------------------------	--

First Name Middle Name Last Name Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ☐ No Yes..... Cash:\$ _____\$ 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions. brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. × Yes..... Institution name: \$ 500.00 17.1. Checking account: Citizens Bank 17.2. Checking account: 17.3. Savings account: 17.4. Savings account: 17.5. Certificates of deposit: 17.6. Other financial account: 17.7. Other financial account: 17.8. Other financial account: 17.9. Other financial account: 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No ☐ Yes..... Institution or issuer name: 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture **⋉** No Name of entity: % of ownership: Yes. Give specific information about 0.00 % them.

Official Form 106A/B Schedule A/B: Property page 5

0.00 %

0.00 %

Debtor 1	Joel	Junior	Muniz Jr.	Case number (if known)	
	First Name	Middle Name	Last Name		

20.	Go	vernment and corp	porate bonds and oth	er negotiable and non-negotiable instruments	
I	Veg Von	otiable instruments -negotiable instrum	include personal check ents are those you can	ss, cashiers' checks, promissory notes, and money orders. not transfer to someone by signing or delivering them.	
	x	No Yes. Give specific information about	Issuer name:		\$
		them	-		Ψ
					\$
					\$
Į	<u> </u>			1(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans	
_	그 또	No Yes. List each			
		account separately.	Type of account:	Institution name:	
			401(k) or similar plan:	:	\$10,000.00
			Pension plan:		\$
			IRA:	·	\$
			Retirement account:		\$
			Keogh:		\$
			Additional account:	·	\$
			Additional account:		\$
	∕oui E <i>xai</i> com		d deposits you have ma	ade so that you may continue service or use from a company I rent, public utilities (electric, gas, water), telecommunications	
		Yes	Ir	nstitution name or individual:	
			Electric: _		\$
			Gas:		\$
			Heating oil:		\$
			Security deposit on re	ental unit:	\$
			Prepaid rent:		\$
			Telephone:		\$
			Water:		\$
			Rented furniture:		\$
			Other:		\$
	An ا 🗷		_	of money to you, either for life or for a number of years)	
			Issuer name and desc	crintion:	
	_		- Isouci Haine and desc	onpaon.	\$
					\$
					\$

Debtor 1 Case number (if known) Joel Junior Muniz Jr Middle Name 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). Yes...... Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit **⋉** No Yes. Give specific \$ __ information about them. 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements **⋈** No ☐ Yes. Give specific information about them. 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses **⋉** No ☐ Yes. Give specific information about them. Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ☐ No Yes. Give specific information about Federal: them, including whether you already filed the returns and the tax 2019 income tax refunds, EIC and additional CTC State: years..... Local: 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement **⋉** No ☐ Yes. Give specific information..... Alimony: \$ _____ Maintenance: Support: Divorce settlement: Property settlement: \$ 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ☐ No Yes. Give specific information..... Earned Income Credit and additional child tax credit

Deb	otor 1	Joel First Name	Junior Middle Name	Muniz Jr. Last Name	Case number (if known)	
31	Inte	erests in insurance	nolicies			
			-	nce; health savings account (HS/	A); credit, homeowner's, or renter's insurance	
		No				
	×	Yes.Name the insur of each policy and li		Company name:	Beneficiary:	Surrender or refund value:
				Anthem (term)	Sons	\$
						\$
						\$
	If yo	u are the beneficiary ive property because	of a living trust,		I ance policy, or are currently entitled to	
		Yes. Give specific in	formation			\$
		mples: Accidents, em		or not you have filed a lawsuit es, insurance claims, or rights to	or made a demand for payment sue	
		Yes. Describe each	claim			\$
34.	rigl	ner contingent and on the to set off claims No	unliquidated cla	ims of every nature, including	counterclaims of the debtor and	
		Yes. Describe each	claim			\$
				<u> </u>		
35.	An	y financial assets y	ou did not alrea	dy list		
	×	No				
		Yes. Give specific in	nformation			\$
36.				ies from Part 4, including any here	_	\$10,520.00
Pai	rt 5:	Describe Any B	usiness-Related	Property You Own or Have ar	n Interest In. List any real estate in Part 1.	
37.	Do	you own or have a	ny legal or equit	able interest in any business-	related property?	
	×	No. Go to Part 6.				
	П	Yes. Go to line 38.				
						Current value of the portion you own? Do not deduct secured claims or exemptions.
38.	Aco	counts receivable o	r commissions	vou already earned		
	_	No		,		_
		Yes. Describe.				\$
39.	Off	ice equipment, furn	ishings, and su	pplies		1 .
	Exan				chines, rugs, telephones, desks, chairs, electronic devices	
	تت					_

Official Form 106A/B Schedule A/B: Property page 8

☐ Yes. Describe.

Debtor 1 Case number (if known) Joel Junior Muniz Jr. Middle Name Last Name 40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade **⋉** No Yes. Describe. 41. Inventory **⋉** No \$ Yes. Describe. 42. Interests in partnerships or joint ventures Yes. Describe Name of entity: % of ownership: 0.00% \$ _____0.00 0.00% 0.00% 43. Customer lists, mailing lists, or other compilations **⋉** No Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))? ☐ Yes. Describe...... 44. Any business-related property you did not already list **⋉** No ☐ Yes. Give specific information 45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached 0.00 for Part 5. Write that number here Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. Yes. Go to line 47. Current value of the portion you own?

Official Form 106A/B Schedule A/B: Property page 9

47. Farm animals

☐ Yes.....

⋉ No

Examples: Livestock, poultry, farm-raised fish

Do not deduct secured claims or exemptions.

Debt	or 1	Joel First Name	Junior Middle Name	Muniz Jr.			Case number (if known)		
48	Cro	ps—either growi	ng or harvested						
_	_	No	ig of flat vested					7	
[Yes. Give specific information						\$_	
-	_	m and fishing equ	uipment, implements, machi	nery, fixtures	, and too	ls of trade			
[Yes						\$_	
50.	Far	ا m and fishing su _l	oplies, chemicals, and feed					J	
	_	No						-	
[Yes						\$_	
-	_ `	/ farm- and comm No	ercial fishing-related proper	ty you did no	ot already	/ list			
Ī		Yes. Give specific information						\$	
			of all of your entries from Pa				-	\$	0.00
Part	7:	Describe All F	Property You Own or Have	an Interest ir	n That Y	ou Did Not Lis	st Above		
			roperty of any kind you did r	not already lis	st?				
_	_	nples: Season tickets, No	country club membership						
[_	Yes. Give						\$	
		specific information						\$	
								\$	
54.	Add	d the dollar value	of all of your entries from Pa	art 7. Write th	at numb	er here	→	\$	0.00
Part	8:	List the Totals	s of Each Part of this Form						
55.	Par	t 1: Total real esta	ate, line 2				→	\$_	27,470.00
56.	Par	t 2: Total vehicles	s, line 5		\$	400.00			
57.	Par	t 3: Total persona	al and household items, line	15	\$	2,600.00			
58.	Par	t 4: Total financia	l assets, line 36		\$	10,520.00			
59.	Par	t 5: Total busines	s-related property, line 45		\$	0.00			
60.	Par	t 6: Total farm- ar	nd fishing-related property, I	ine 52	\$	0.00			
61.	Par	t 7: Total other pr	operty not listed, line 54		+\$	0.00	1		
62.	Tot	al personal prope	rty. Add lines 56 through 61		\$	13,520.00	Copy personal property total ->	+\$_	13,520.00
63.	Tot	al of all property	on Schedule A/B. Add line 55	+ line 62				\$_	40,990.00

Fill in this infor	mation to identify	your case:			
Debtor 1	Joel First Name	Junior Middle Name	MunizJr. Last Name		
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name		
United States	Bankruptcy Court	for the: Northern	District of Ohio		
Case number (If known)					Check if this is an amended filing.

Official Form 106C

Schedule C: The Property You Claim As Exempt

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Identify the Property You Claim as Exempt 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you. You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) You are claiming federal exemptions. 11 U.S.C. § 522(b)(2) 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below. Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow Schedule A/B that lists this property portion you own exemption Check only one box for each Copy the value from Schedule A/B exemption. Brief 2329.66A(1) 27.470.00 Personal residence **×** \$ 27,470.00 description: 100% of fair market value, up to I ine from Schedule any applicable statutory limit A/B: Brief 2329.66A(4)a 1,200.00 Household Goods description: ■ 100% of fair market value, up to_ Line from any applicable statutory limit Schedule A/B: Brief 2329.66A(4)a \$ 800.00 800.00 description: ☐ 100% of fair market value, up to Line from any applicable statutory limit Schedule 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? ☐ No ☐ Yes

Official Form 106C

Schedule C: The Property You Claim As Exempt

page 1 of 2

Debtor 1

Joel Junior Muniz Jr.

First Name Middle Name Last Name

Part 2: Additional Page

	n of the property and line on nat lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Check only one box for each exemption	
Brief description: Line from Schedule A/B:	Clothing 11	\$600.00	\$ 600.00 100% of fair market value, up to any applicable statutory limit	2329.66A(4)a
Brief description: Line from Schedule A/B:	Cash on hand	\$	\$	2329.66A(3)
Brief description: Line from Schedule A/B:	Citizens Bank account	\$500.00	\$ 500.00 100% of fair market value, up to any applicable statutory limit	2329.66A(3) 2329.66A(18)
Brief description: Line from Schedule A/B:	401(k) 21	\$10,000.00	\$ 100% of fair market value, up to_ any applicable statutory limit	2329.66A(10)
Brief description: Line from Schedule A/B:	Automobile 3.1	\$400.00	\$ 400.00 100% of fair market value, up to any applicable statutory limit	2329.66A(2)
Brief description: Line from Schedule A/B:	Income tax refunds	\$1,655.00	\$ 1,100.00 100% of fair market value, up to any applicable statutory limit	2329.66A(3) 2329.66A(18)
Brief description: Line from Schedule A/B:	EIC and child tax credit 30	\$	\$ 100% of fair market value, up to_ any applicable statutory limit	2329.66A(9)q
Brief description: Line from Schedule A/B:		\$	\$ 100% of fair market value, up to_ any applicable statutory limit	
Brief description: Line from Schedule A/B:		\$	\$ 100% of fair market value, up to_ any applicable statutory limit	
Brief description: Line from Schedule A/B:		\$	\$ 100% of fair market value, up to_ any applicable statutory limit	
Brief description: Line from Schedule A/B:		\$	\$ 100% of fair market value, up to_ any applicable statutory limit	
Brief description: Line from Schedule A/B:		\$	\$ 100% of fair market value, up to_ any applicable statutory limit	

Case number (if known)

Official Form 106C

Schedule C: The Property You Claim as Exempt

Fill in this infor	mation to identify your case								
Debtor 1	Joel	Junio	r	MunizJr.					
Boblot 1	First Name	Middle N		Last Name					
Debtor 2 (Spouse, if filing)	First Name	Middle N	ame	Last Name					
United States	Bankruptcy Court for the: Nor	rthern		District of Ohio					
Case number									
(If known)							Check if	this is an amend	ded filing.
Official	Form 106D								· ·
	Form 106D	- \A/	he Heye	Claima Ca	ourod by	, D., .,			40/45
	le D: Creditors							nonsible for supp	12/15
information.	If more space is needed	, copy	the Additional	Page, fill it out,					
-	ges, write your name and		•	•					
	editors have claims secu heck this box and submit the	-			ulos Vou bavo	nothing of	so to ropor	t on this form	
_	fill in all of the information b		ii to the court with	ii your ourer scried	ules. Tou have	nothing ei	se to repor	OIT triis TOTTI.	
Part 1: List	All Secured Claims								
		L			P1	Column A	4	Column B	Column C
	cured claims. If a creditor for each claim. If more the			,		Amount		Value of collateral	Unsecured
creditors in creditor's n	n Part 2. As much as possit	ble, lis	t the claims in alp	habetical order ac	cording to the	Do not devalue of co		that supports this claim	portion If any
2.1	ame.		Deceribe the pr	anarty that agained	the eleim.	œ.		\$	\$
Creditor's Na	me	— г	Describe the pro	operty that secures	the claim:	\$ 1		4	Φ
Orealier 5 Ha		L							
Number	Street			you file, the claim	is: Check all				
			that apply. Contingent						
			☐ Unliquidated	d					
City	State ZIP Co	ode	☐ Disputed						
Who owes t	he debt? Check one.		Nature of lien.	Check all that appl	y.				
Debtor 1	•			ent you made (such	as mortgage or				
☐ Debtor 2	2 only I and Debtor 2 only		secured car lo	,					
_	one of the debtors and and	other	_ ′	n (such as tax lien, m en from a lawsuit	echanic's lien)				
				ling a right to offset) _					
	f this claim relates to a nity debt								
Date debt w	as incurred		Last 4 digits of	account number					
2.2			Describe the pro	operty that secures	the claim:	\$		\$	\$
Creditor's Na	me								
Number	Street	L	As of the date	you file, the claim	is: Check all	J			
			that apply.	•					
			☐ Contingent ☐ Unliquidated	J					
City	State ZIP Co	ode	Disputed	ı					
Who owes t	he debt? Check one.		·	Check all that appl	V				
Debtor 1	only			ent you made (such					
Debtor 2	•		or secured of		as mongage				
	and Debtor 2 only one of the debtors and and	0 th 0 r		n (such as tax lien, m	echanic's lien)				
_		Juler		en from a lawsuit					
	f this claim relates to a nity debt		Utner (includ	ling a right to offset) _					
Date debt w	•		Last 4 digits of	account number					
	ar value of your entries i	n Colu			mber here:	\$	0.00		

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

page 1 of _1_

Chastity Polanco														
Debtor 2 Spous Prince Finance Mode Rease Lightware Lig	Fill in	this infor	mation to identify	y your case:										
Design 2 Design 2 Design 3 Design 4	Debt	tor 1	Joel	Junior		MunizJr.								
United States Barkruptcy Court for the: Northern Case number (if xeron): Check if this is an amended Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORIT claims and Part 2 for creditors with NONPRIORIT claims and Part 2 for creditors with NONPRIORIT claims and Part 2 for creditors with NONPRIORITY unsecured claims. If a creditor has more than one priority unsecured claims, list the creditor separately for each claims seach claim instead, identify what type of claim is it a creditor has more than one priority unsecured claims, list the creditor separately for each c	Debt	tor 2	First Name	Middle Name		Last Name								
Check if this is an amended Cofficial Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORIT claims and Part 2 for creditors with NonPart 2 for creditor size of the Part 2 for creditor size and 2 for creditor size and 2 for creditor size and 2 for creditor s			First Name	Middle Name		Last Name								
Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORIT Archive Property (Official Form 196A/B) and on Schedule G. Executory Contracts and Unexpired Leases (Official Form 196A/B) and on Schedule G. Executory Contracts and Unexpired Leases (Official Form 196A/B) and on Schedule G. Executory Contracts and Unexpired Leases (Official Form 196A/B) and on Schedule G. Executory Contracts and Unexpired Leases (Official Form 196A/B) and on Schedule G. Executory Contracts and Unexpired Leases (Official Form 196A/B) and on Schedule G. Executory Contracts and Unexpired Leases (Official Form 196A/B) and on Schedule G. Executory Contracts and Unexpired Leases (Official Form 196A/B) and on Schedule G. Executory Contracts and Unexpired Leases (Official Form 196A/B) and on Schedule G. Executory Contracts and Unexpired Leases (Official Form 196A/B) and on Schedule G. Executory Contracts and Unexpired Leases (Official Form 196A/B) and on Schedule G. Executory Contracts and Unexpired Leases (Official Form 196A/B) and on Schedule G. Executory Contracts and Unexpired Leases (Official Form 196A/B) and on Schedule G. Executory Contracts and Unexpired Leases (Official Form 196A/B) and on Schedule G. Executory Contracts and Unexpired Leases (Official Form 196A/B) and on Schedule G. Executory Contracts and Unexpired Leases (Official Form 196A/B) and on Schedule G. Executory Contracts and Unexpired Leases (Official Form 196A/B) and on Schedule G. Executory Contracts and Unexpired Leases (Official Form 196A/B) and on Schedule G. Executory Contracts and Unexpired Leases (Official Form 196A/B) and on Schedule G. Executory Contracts and Universe Leases (Official Form 196A/B) and Contracts and Universe Leases (Official Form 196A/B) and Contracts and Universe Leases (Official Form 196A/B) and Contracts and	Unite	ed States	Bankruptcy Court	for the: Northern		District of Ohio								
Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORIT List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts or unexpired leases that could result in a claim. Also list executory contracts or unexpired leases that could result in a claim. Also list executory contracts on with property (Official Form 106A/B) and on Schedule in the claims secured claims secured claims that are listed in Schedule D: Creditors Who Hold Claims Secured by Property. If more needed, copy the Part you need, fill it out, number the entries in the boses on the left. Attach the Continuation Page to this page. On any additional pages, write your name and case number (it known). Part 1: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? No. Got De Part 2. Yes. 2. List all of Your PRIORITY Unsecured claims is. If a claim has both priority and nonpriority amounts, list the claim here and show both pior nonpriority amounts. As much as possible, list the claim has both priority and nonpriority amounts. As much as possible, list the claim is alphabetical order according to the creditor's name. If you have more than not on unsecured claims, fill of the Continuation Page of Part 1. I more than one creditor hodds a parcludar claim, list of the continuation Page of Part 1. I more than one creditor hodds a parcludar claim, list of the continuation Page of Part 1. I more than not on creditor hodds and parcludar claim, list of the continuation Page of Part 1. I more than not on creditor hodds and parcludar claim, list of the continuation Page of Part 1. I more than not on creditor hodds and parcludar claim, list of the continuation Page of Part 1. I more than not on the creditor's name. If you have more than not on the creditor's name if you have more than not part that page of			-] (Che	ck if this	is a	n amer	nded fi	ling.
Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORIT List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts or unexpired leases that could result in a claim. Also list executory contracts or unexpired leases that could result in a claim. Also list executory contracts on with property (Official Form 106A/B) and on Schedule in the claims secured claims secured claims that are listed in Schedule D: Creditors Who Hold Claims Secured by Property. If more needed, copy the Part you need, fill it out, number the entries in the boses on the left. Attach the Continuation Page to this page. On any additional pages, write your name and case number (it known). Part 1: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? No. Got De Part 2. Yes. 2. List all of Your PRIORITY Unsecured claims is. If a claim has both priority and nonpriority amounts, list the claim here and show both pior nonpriority amounts. As much as possible, list the claim has both priority and nonpriority amounts. As much as possible, list the claim is alphabetical order according to the creditor's name. If you have more than not on unsecured claims, fill of the Continuation Page of Part 1. I more than one creditor hodds a parcludar claim, list of the continuation Page of Part 1. I more than one creditor hodds a parcludar claim, list of the continuation Page of Part 1. I more than not on creditor hodds and parcludar claim, list of the continuation Page of Part 1. I more than not on creditor hodds and parcludar claim, list of the continuation Page of Part 1. I more than not on creditor hodds and parcludar claim, list of the continuation Page of Part 1. I more than not on the creditor's name. If you have more than not on the creditor's name if you have more than not part that page of	Off	icial F	Form 106	E/F										
List the other party to any executory contracts or unexpired leases that could result in a claim. Also slist executory contracts and Unexpired Leases (Official Form 106G). Do not in creditors with partially secured claims that are listed in Schedule C: Executory Contracts and Unexpired Leases (Official Form 106G). Do not in creditors with partially secured claims that are listed in Schedule D: Creditors Who Hold Claims Secured by Property. If more needed, copy the Part you need, ed. (fill tout, number the entries in the boxes on the left. Attach the Continuation Page to this page. On any additional pages, write your name and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims List All of Your PRIORITY Unsecured Claims against you? No. Go to Part 2. Yes.					ave U	Insecured Claims								12/15
Do any creditors have priority unsecured claims against you? No. Go to Part 2. Yes. Yes. ZList all of your priority unsecured claim it is. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts. As much as possible, list the claim is alphabetical order according to the creditor's name. If you have more than two; unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) Chastity Polanco	List t A/B: credineede any a	the other Property tors with ed, copy additiona	r party to any o (Official Form h partially sec the Part you n Il pages, write	executory contracts 106A/B) and on Schured claims that are eed, fill it out, numb your name and case	or une thedule re listed per the e numbe	expired leases that could be G: Executory Contracts and in Schedule D: Creditor entries in the boxes on the	result in a claim ad Unexpired Lears s Who Hold Cla	. A ases aims	lso li (Offi Sec	st execu icial Forr cured by	tory on 106 <i>Prop</i>	contracts G). Do n <i>erty</i> . If i	s on So ot inclu more s	chedule ide any pace is
No. Go to Part 2. Yes. 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both prior nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two junsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) Total claim Priority Nor amount Name Chastity Polanco	Part 1	1: Lis	t All of Your PR	IORITY Unsecured CI	Claims									
Chastity Polanco	2.Lis ea no un	No. 6 Yes. St all of yach claim onpriority assecured	Go to Part 2. /our priority un listed, identify v amounts. As m claims, fill out th	secured claims. If a what type of claim it is uch as possible, list the Continuation Page	a credito s. If a cla he claim e of Part	r has more than one priority aim has both priority and nor is in alphabetical order acco 1. If more than one creditor	priority amounts, rding to the credite holds a particular	list tor's r	hat cl name	laim here e. If you ha	and s	how both ore than	n priority two prio	/ and
Castity Polanco Priority Creditor's Name When was the debt incurred?		or arr cx	Sianation of Cao	rrtype or olaim, see in	no mone		struction bookiet.)		otal o	claim		•	Nonpr	_
Number Street S	9				Last 4	digits of account number		\$;	301.00	\$	301.00	\$	0.00
As of the date you file, the claim is: Check all that apply. Defiance OH 43512 Contingent Unliquidated Disputed	F	Priority Cred	litor's Name			•								
Last 4 digits of account number \$ 236.50 \$ 236.50 \$	- - - - - - - - - - - - - - - - - - -	Defiance City Who inc Det Det Det At le Che Is the cla	urred the debt? otor 1 only otor 2 only otor 1 and Debtor east one of the de ck if this claim is f	State ZIP Code Check one. 2 only ebtors and another or a community debt	Type (Contingent Unliquidated Disputed of PRIORITY unsecured clay Domestic support obligations Faxes and certain other debts overnment Claims for death or personal invereintoxicated	aim: s you owe the njury while you	oly.						
When was the debt incurred? Number Street Street	1				Last 4	digits of account number		\$;	236.50	\$	236.50	\$	0.00
Edgerton OH 43517 City State ZIP Code Unliquidated Who incurred the debt? Check one. ☑ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt	_				When	was the debt incurred?					_		-	
Is the claim subject to offset? No Yes Claims for dearn or personal injury write you were intoxicated Were intoxicated Other. Specify	\ 	Who incu Deb Deb At le	prized the debt? (optor 1 only oftor 2 only oftor 1 and Debtor east one of the deck if this claim is firm subject to of	State ZIP Code Check one. 2 only ebtors and another or a community debt	Type (Contingent Unliquidated Disputed of PRIORITY unsecured clay Domestic support obligations Faxes and certain other debts overnment Claims for death or personal invereintoxicated	aim: s you owe the njury while you	лу.						

Schedule E/F: Creditors Who Have Unsecured Claims

Official Form 106E/F

page 1 of <u>6</u>

Debtor 1

Joel	Junior	Muniz Jr.	Case number (if known)	
First Name	Middle Name	Last Name	-	

Part	Your PRIORITY Unsecured Claims -	Cont	inuation Page				
	r listing any entries on this page, number ther	n beg	ginning with 2.3, followed by 2.4, and so forth.	Total claim	Priority amount	Nonpri amour	
4.4	J	Las	st 4 digits of account number	\$	_ \$	_ \$	0.00
	Priority Creditor's Name		en was the debt incurred?				
	Number Street		of the date you file, the claim is: Check all that apply.				
	City State ZIP Code Who incurred the debt? Check one.		Contingent Unliquidated Disputed				
	Debtor 1 only	Тур	oe of PRIORITY unsecured claim:				
	Debtor 2 only Debtor 1 and Debtor 2 only		Domestic support obligations				
	At least one of the debtors and another Check if this claim is for a community debt		Taxes and certain other debts you owe the government				
	Is the claim subject to offset?		Claims for death or personal injury while you were intoxicated				
	∐ Yes		Other. Specify				
	Priority Creditor's Name	Las	st 4 digits of account number	\$	_ \$	_ \$	0.00
	,	Wh	en was the debt incurred?				
	Number Street	۸۵	of the date you file, the claim is: Check all that apply.				
			Contingent				
	City State ZIP Code	H	Unliquidated Disputed				
	Who incurred the debt? Check one.		·				
	Debtor 1 only Debtor 2 only	ıyp	pe of PRIORITY unsecured claim:				
	Debtor 1 and Debtor 2 only		Domestic support obligations				
	At least one of the debtors and another	Ц	Taxes and certain other debts you owe the government				
	Check if this claim is for a community debt		Claims for death or personal injury while you				
	Is the claim subject to offset?	_	were intoxicated				
	Yes	Ш	Other. Specify				
		Las	st 4 digits of account number	\$	\$	\$	0.00
	Priority Creditor's Name	Wh	en was the debt incurred?				
	Number Street						
		As	of the date you file, the claim is: Check all that apply.				
		무	Contingent				
	City State ZIP Code	H	Unliquidated Disputed				
	Who incurred the debt? Check one.	T	·				
	Debtor 1 only Debtor 2 only	тур □	pe of PRIORITY unsecured claim: Domestic support obligations				
	Debtor 2 only Debtor 1 and Debtor 2 only						
	At least one of the debtors and another	Ц	Taxes and certain other debts you owe the government				
	Check if this claim is for a community debt		Claims for death or personal injury while you				
	Is the claim subject to offset?	П	were intoxicated				
	Yes		Other. Specify				

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

page <u>2</u> of <u>6</u>

Joel	Junior	Muniz Jr.	Case number (if known)	
First Name	Middle Name	Last Name		

Pai	List All of Your NONPRIORITY Unsecured Claims				
3.	Do any creditors have nonpriority unsecured claims against you	?			
	No. You have nothing to report in this part. Submit this form to the	ne co	urt with your other schedules.		
	X Yes				
4.	List all of your nonpriority unsecured claims in the alphabetical of	rder	of the creditor who holds each claim. If a creditor $% \left(1\right) =\left(1\right) \left(1\right) \left$	has more	than one
	priority unsecured claim, list the creditor separately for each claim. Fo included in Part 1. If more than one creditor holds a particular claim, li				
	claims fill out the Continuation Page of Part 2.	ot tile	o and drounded in that our you have more than four p	ononly di	iocourca
4.4				Total	claim
4.1	□I Fifth-Third Bank	Las	t 4 digits of account number	\$	900.00
	Nonpriority Creditor's Name	Wh	en was the debt incurred?		
	39 Fountain Square Plaza				
	Number Street		of the date you file, the claim is: Check all that apply.		
	Cincinnati OH 45263 City State ZIP Code	_			
	Who incurred the debt? Check one.	님	Contingent		
	Debtor 1 only		Unliquidated		
	Debtor 2 only		Disputed		
	☐ Debtor 1 and Debtor 2 only	ıур	pe of NONPRIORITY unsecured claim:		
	At least one of the debtors and another	님	Student loans		
	☐ Check if this claim is for a community debt	Ц	Obligations arising out of a separation agreement		
	Is the claim subject to offset?		or divorce that you did not report as priority claims		
	No	ч	Debts to pension or profit-sharing plans, and other similar debts		
	Yes	×	Other. Specify Overdrawn bank account		
4.2	2				
	Nonpriority Creditor's Name	Las	t 4 digits of account number	\$	
	. terpriority diseases of teams	Wh	en was the debt incurred?		
	Number Street		of the date you file, the claim is: Check all that apply.		
	City State ZIP Code	_			
	Who incurred the debt? Check one.		Contingent Unliquidated		
	Debtor 1 only		Disputed		
	Debtor 2 only		be of NONPRIORITY unsecured claim:		
	Debtor 1 and Debtor 2 only	·,,			
	At least one of the debtors and another	片	Student loans Obligations arising out of a separation agreement		
	☐ Check if this claim is for a community debt	_	or divorce that you did not report as priority claims		
	Is the claim subject to offset?		Debts to pension or profit-sharing plans, and other		
	□ No		similar debts		
	☐ Yes		Other. Specify	_	
4.3		Las	at 4 digits of account number	\$	1,201.00
	DFAS DE/FYDC Nonpriority Creditor's Name		-	Ψ	1,201.00
	8899 East 56th St.	Wh	en was the debt incurred? 12-8-2010		
	Number Street	As	of the date you file, the claim is: Check all that		
	Indianapolis IN 46249-3300 City State ZIP Code	a	apply.		
	Who incurred the debt? Check one.		Contingent		
	Debtor 1 only		Unliquidated		
	Debtor 2 only	П	Disputed		
	Debtor 1 and Debtor 2 only	Тур	be of NONPRIORITY unsecured claim:		
	At least one of the debtors and another		Student loans		
	☐ Check if this claim is for a community debt		Obligations arising out of a separation agreement		
	,	_	or divorce that you did not report as priority claims		
	Is the claim subject to offset?	Ц	Debts to pension or profit-sharing plans, and other		
	Yes	×	Similar debts Other, Specify Government overpayment		
			Other, Specify Government Overpayment		

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

page <u>3</u> of <u>6</u>

Debtor 1

Joel Junior Muniz Jr

Case number (if known) Middle Name

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** Navy Federal Credit Union Last 4 digits of account number Nonpriority Creditor's Name 8,883.00 PO Box 3700 When was the debt incurred? 03-29-2010 Street **Merrifield** 22119-3700 VA As of the date you file, the claim is: Check all that ZIP Code State apply. Contingent Who incurred the debt? Check one. Unliquidated Debtor 1 only Debtor 2 only Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not report as priority claims Is the claim subject to offset? Nο Debts to pension or profit-sharing plans, and other Yes similar debts × Other. Specify Auto Ioan Navy Federal Credit Union Last 4 digits of account number Nonpriority Creditor's Name 7.139.00 PO Box 3700 When was the debt incurred? 03-14-2008 Number Merrifield City 22119-3700 VA As of the date you file, the claim is: Check all that apply. Contingent Who incurred the debt? Check one. × Unliquidated Debtor 1 only Debtor 2 only Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another Student loans Check if this claim is for a community debt Obligations arising out of a separation agreement or Is the claim subject to offset? divorce that you did not report as priority claims No Debts to pension or profit-sharing plans, and other Yes similar debts Other. Specify credit card USAA Savings Bank Last 4 digits of account number Nonpriority Creditor's Name 2.015.00 10750 McDermott FWY When was the debt incurred? 10-24-2009 Number San Antonio TX 78288-1600 As of the date you file, the claim is: Check all that Who incurred the debt? Check one. Contingent Debtor 1 only Unliquidated Debtor 2 only Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or Is the claim subject to offset? divorce that you did not report as priority claims No Debts to pension or profit-sharing plans, and other Yes similar debts × Other. Specify credit card

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

page <u>4</u> of <u>6</u>

Debtor 1

<u>Jo</u>el Junior Muniz Jr.

Case number (if known) Middle Name Last Name

Part	Your NONPRIORITY Unsecured Claims - Continuation Page		
Afte	listing any entries on this page, number them beginning with 4	1.5, followed by 4.6, and so forth.	Total claim
4.7	Credit Collection Service Nonpriority Creditor's Name PO Box 607 Number Street	Last 4 digits of account number When was the debt incurred? 03-24-2012	\$161.00
	Norwood MA 02062 City State ZIP Code	As of the date you file, the claim is: Check all that apply.	
	Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	□ Contingent □ Unliquidated □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts ▼ Other. Specify Insurance	
4.8	Nonpriority Creditor's Name	Last 4 digits of account number	\$
	Number Street	When was the debt incurred?	
	City State ZIP Code	As of the date you file, the claim is: Check all that apply.	
	Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	 Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
	□ No □ Yes	Debts to pension or profit-sharing plans, and other similar debtsOther. Specify	
	Nonpriority Creditor's Name Number Street	Last 4 digits of account number When was the debt incurred?	\$
	City State ZIP Code	As of the date you file, the claim is: Check all that apply.	
	Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	☐ Contingent ☐ Unliquidated ☐ Disputed	
	☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset?	Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or	
	No Yes	divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify	

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

page <u>5</u> of <u>6</u>

Part 4:

Add the Amounts for Each Type of Unsecured Claim

1. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

Total	l claim

Total claims from Part 1

- 6a. Domestic support obligations
- 6b. Taxes and certain other debts you owe the government
- 6c. Claims for death or personal injury while you were intoxicated
- 6d. Other. Add all other priority unsecured claims. Write that amount here.
- 6e. Total. Add lines 6a through 6d.

- 537.50
- 6b. 0.00
- 6c. 0.00
- 6d.
- 6e. 537.50

Total claims from Part 2

- 6f. Student loans
- 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority
- 6h. Debts to pension or profit-sharing plans, and other similar debts
- 6i. Other. Add all other nonpriority unsecured claims. Write that amount here.
- 6j. Total. Add lines 6f through 6i.

- **Total claim**
- 6f. 0.00
- 6g. 0.00
- 6h.

Fill in this infor	rmation to identify	your case:		
Debtor 1	Joel First Name	Junior Middle Name	MunizJr. Last Name	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	
United States	Bankruptcy Court fo	or the: Northern	District of Ohio	
Case number (If known)	-			Check if this is an amended filing.

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

3	Heau	ie G. Exec	Julioi y	Contracts and t	niekpiieu Leases 12	,,,,						
info	rmation. I	f more space is r	needed, cop		ling together, both are equally responsible for supplying correct but, number the entries, and attach it to this page. On the top of any							
1.	Do you have any executory contracts or unexpired leases?											
	No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.											
	_				ses are listed on Schedule A/B: Property (Official Form 106A/B).							
		ent, vehicle leas			contract or lease. Then state what each contract or lease is for (for some form in the instruction booklet for more examples of executory contracts are	ıd						
	Person or	company with w	hom you h	ave the contract or lease	State what the contract or lease is for							
2.1												
	Name											
	Nicosia	Otro- ot										
	Number	Street										
	City		State	ZIP Code								
2.2					-							
	Name											
	Number	Street										
	City		State	ZIP Code								
			Otate	Zii Code								
2.3												
	Name											
	Number	Street			<u></u>							
	Number	Sileet										
	City		State	ZIP Code								
2.4												
<u> </u>	Name											
	INAME											
	Number	Street										
	City		State	ZIP Code								
2.5												
	Name											
	Number	Street										
	City		State	ZIP Code								

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

page 1 of _1_

Fill in this info	rmation to identify y	our case:		
Debtor 1	Joel First Name	Junior Middle Name	MunizJr. Last Name	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	
United States	Bankruptcy Court for	the: Northern	District of Ohio	
Case number (If known)	-			Check if this is an amended filing.

Official Form 106H

Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

	. , , , , , , , , , , , , , , , , , , ,		
3	b you have any codebtors? (If you are filing a joint case, do not list either spouse as No Yes	a codebtor.)	
	110. 00 to line o.	ington, and V	
-	Tes. Did your spouse, former spouse, or legal equivalent live with you at the time:	ſ	
	□ No		
	Yes. In which community state or territory did you live? Fill in the name a	and current a	ddress of that person.
	Name of your spouse, former spouse, or legal equivalent		
	Number Street		
	City State ZIP Code		
2 In	Column 1, list all of your codebtors. Do not include your spouse as a codebtor	if your spor	ise is filing with you. List the person
	hown in line 2 again as a codebtor only if that person is a guarantor or cosigner.		
	chedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule		
	chedule E/F, or Schedule G to fill out Column 2.	•	,
	Column 1: Your codebtor	Colu	umn 2: The creditor to whom you owe the debt
		Che	eck all schedules that apply:
3.1		_ 🗆	Cahadida D. lina
	Name	_	Schedule D, line
		_ 📙	Schedule E/F, line
	Number Street		Schedule G, line
	City State ZIP Code	_	
3.2			
	Name	_ 🗆	Schedule D, line
	realite		Schedule E/F, line
	Number Street		Schedule G, line
	0.1 710.0	_	
3.3	City State ZIP Code		
0.0		_ 🗆	Schedule D, line
	Name		Schedule E/F, line
	Number Street		Schedule G, line
		_	
	City State ZIP Code		

Official Form 106H Schedule H: Your Codebtors page 1 of _1_

Fill in this info	rmation to identify	your case:		
Debtor 1	Joel First Name	Junior Middle Name	MunizJr. Last Name	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	
United States	Bankruptcy Court fo	or the: Northern	District of Ohio	
Case number	. ,			
(If known)				Check if this is: An amended filing
				A supplement showing post-petition chapter 13 income as of the following date:
Official	Form 106I			MM / DD / YYYY
Sched	ule I: Yo	ur Income		12/15
supplying co spouse. If yo attach a sep	orrect information ou are separated	n. If you are married and not fi and your spouse is not filing v s form. On the top of any addi	ling jointly, and your spouse is livir with you, do not include information	nd Debtor 2), both are equally responsible for ng with you, include information about your n about your spouse. If more space is needed, case number (if known). Answer every question.
			Debtor 1	Debtor 2 or non-filing spouse
job, attach with inform	e more than one a separate page lation about employers.	Employment status	Employed Not employed	Employed Not employed
or self-emp	rt-time, seasonal, bloyed work. may Include	Occupation	Plasma Cutter	
	nomemaker, if it	Employer's name	Defiance Metal Products	
		Employer's address		
			Number Street	Number Street
			21 Seneca St.	
			Defiance, OH 43512 City State ZIP Code	e City State ZIP Code
		How long employed there?	4 years	
	Give Details Abou	t Monthly Income		
	monthly income a less you are separ		n. If you have nothing to report for any	line, write \$0 in the space. Include your non-filing
If you or yo	our non-filing spou		er, combine the information for all emp	loyers for that person on the lines below. If you
	-,,	-1	For Debtor	For Debtor 2 or

Official Form 106I Schedule I: Your Income page 1

List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage

Estimate and list monthly overtime pay.

Calculate gross income. Add line 2 + line 3.

would be.

3.

For Debtor 1

2,436.00

2,436.00

0.00 +

non-filing spouse

0.00

0.00

0.00

Muniz Jr. Case number (if known)

 Joel
 Junior
 Muniz J

 First Name
 Middle Name
 Last Name

				For D	Debtor 1		ebtor 2 or iling spouse		
	Сор	y line 4 here	4.	\$	2,436.00	\$	0.00		
5.	List	all payroll deductions:							
		Tax, Medicare, and Social Security deductions	5a.	\$	670.80	\$	0.00		
	5b.	Mandatory contributions for retirement plans			0.00		0.00		
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00		0.00		
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	0.00		
	5e.	Insurance	5e.	\$	0.00	\$	0.00		
	5f.	Domestic support obligations	5f.	\$	0.00	\$	0.00		
	5g.	Union dues	5g.	\$	0.00	\$	0.00		
	5h.	Other deductions. Specify:	5h.	+\$	0.00	+\$	0.00		
6.	Add	the payroll deductions. Add lines $5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h$	6.	\$	670.80	\$	0.00		
7.	Calc	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_	1,765.20	\$	0.00		
8.	List	all other income regularly received:							
	8a.	Net income from rental property and from operating a business, profession, or farm							
		Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total		_					
		monthly net income.			0.00		0.00		
		Interest and dividends	8b.	\$ <u>_</u>	0.00	\$	0.00		
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive							
		Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.		_	0.00		0.00		
		Unemployment compensation	8d.		0.00		0.00		
		Social Security	8e.	\$ <u>_</u>	0.00	\$	0.00		
	8f.	Other government assistance that you regularly receive							
		Include cash assistance and the value (if know) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:		\$	0.00	\$	0.00		
	8g.	Pension or retirement income	8g.	\$ \$	0.00		0.00		
	8h.	Other monthly income. Specify:	•		0.00		0.00		
9.		all other income. Add lines 8a + 8b + 8c + 8d + 8e +8f +8g +8h	9.	* <u> </u>	0.00	\$	0.00		
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$	1,765.20	\$	0.00	= \$	1,765.20
11.	Stat	e all other regular contributions to the expenses that you list in Se	ched	ule J.			<u> </u>	-	
		ude contributions from an unmarried partner, members of your households or relatives.	old, y	our de	pendents, your r	oomma	tes, and other		
	Do r	not include any amounts already included in lines 2-10 or amounts that	are r	ot ava	ilable to pay exp	enses l	listed in <i>Schedul</i>	e J.	
	Spe	cify:					11	* _	0.00
12.		the amount in the last column of line 10 to the amount in line 11. e that amount on the Summary of Schedules and Statistical Summary of Ce						\$_	1,765.20
									bined hly income
13.	_ `	you expect an increase or decrease within the year after you file th	nis fo	rm?					y moonie
	_	Yes. Explain:							
		·							

Fill	in this infor	mation to identify you	ır cas	e:			I				
	Debtor 1	Joel First Name		Junior Middle Name	MunizJr. Last Name		Check i	f this is:			
	Spouse, if filing)	First Name		Middle Name	Last Name				nded filing		
L	Inited States	Bankruptcy Court for th	e: <u>Nc</u>	orthern	District of Oh	iio			ement showing page of the following page of the following page of the	-	•
	Case number							MM /	DD / YYYY		
Ì	,							-	ate filing for Debt 2 maintains a sep		
0	fficial F	Form 106J					J	Debioi 2	z mamams a sep	arate i	louseriolu
		ule J: You	ır E	Expenses							12/15
Be inf (if	as comple ormation. I known). Ar	ete and accurate as	pos: eded on.	sible. If two married , attach another sho	l people are fili eet to this form	ing together, both are ean. On the top of any add	qually r itional _l	espons pages,	sible for suppl write your na	ying o	correct
1.	☐ Yes.	Go to line 2. Does Debtor 2 live in No.		eparate household? a separate Schedule	J.						
2.	Do you ha	ave dependents		No							
	Do not list Debtor 2.	Debtor 1 and	×	Yes. Fill out this inf each dependent		Dependent's relationshi Debtor 1 or Debtor 2	p to		Dependent's age	with	s dependent live you?
		te the dependent's				son			18	∐ ⊠	No Yes
	names.										No
											Yes
											No Yes
											No
											Yes
											No Yes
3.	expenses	xpenses include of people other self and your	x	No Yes.							
Pa		stimate Your Ongoi	ng M	lonthly Expenses							
ex	timate you	r expenses as of yo of a date after the b	our b	ankruptcy filing dat		are using this form as a ental <i>Schedule J</i> , check					
Inc	clude expei	nses paid for with r		eash government as t on <i>Schedule I: Yo</i>		u know the value of icial Form B 6I.)			Your E	kpense	es
4.		al or home owners and any rent for the		xpenses for your re und or lot.	esidence. Includ	de first mortgage		4. \$			0.00
		cluded on line 4:									05.00
		l estate taxes						•			85.00
	4b. Prop	perty, homeowner's,	or re	nter's insurance				4b. \$			105.00
	4c. Hon	ne maintenance, rep	air, a	nd upkeep expenses	3			4c. \$			100.00
	4d. Hon	neowner's association	n or	condominium dues				4d. \$			0.00

Official Form 106J Schedule J: Your Expenses page 1

Joel First Name Debtor 1 Junior Muniz Jr. Case number (if known) Last Name

Middle Name

		Your Expenses
. Additional mortgage payments for your residence, such as home equity loans.	5. \$	0.00
. Utilities:		
6a. Electricity, heat, natural gas	6a. \$	250.00
6b. Water, sewer, garbage collection	6b. \$	120.00
6c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$	120.00
6d. Other. Specify:	6d. \$	0.00
. Food and housekeeping supplies	7. \$	400.00
. Childcare and children's educational costs	8. \$	0.00
. Clothing, laundry, and dry cleaning	9. \$	20.00
0. Personal care products and services	10. \$	20.00
1. Medical and dental expenses	11. \$	25.00
 Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. 	12. \$ <u> </u>	250.00
3. Entertainment, clubs recreation, newspapers, magazines, and books	13. \$	0.00
4. Charitable contributions and religious donations	14. \$	0.00
 Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 		
15a. Life insurance	15a. \$	0.00
15b. Health insurance	15b. \$	0.00
15c. Vehicle insurance	15c. \$	70.00
15d. Other insurance. Specify:	15d. \$	0.00
6. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16. \$ <u> </u>	0.00
7. Installment or lease payments:		
17a. Car payments for Vehicle 1	17a. \$	0.00
17b. Car payments for Vehicle 2	17b. \$	0.00
17c. Other. Specify:	17c. \$	0.00
17d. Other. Specify:	17d. \$	0.00
Your payments of alimony, maintenance, and support that you did not report as deduct from you pay on line 5, Schedule I, Your Income (Official Form B 6I).		0.00
Other payments you make to support others who do not live with you. Specify:	19. \$	0.00
0. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I:	Your Income:	
20a. Mortgages on other property	20a. \$	0.00
20b. Real estate taxes	20b. \$	0.00
20c. Property, homeowner's, or renter's insurance	·	0.00
20d. Maintenance, repair, and upkeep expenses		0.00
20e. Homeowner's association or condominium dues		0.00

Official Form 106J Schedule J: Your Expenses page 2

Debt	or 1	Joel	Junior	Muniz Jr.	Case numbe	r (if known)	
		First Name	Middle Name	Last Name	_		
21.	Other	r. Specify:			21.	\$	0.00
22.		ulate your mont Add lines 4 throu				\$	1,565.00
	22b. (Copy line 22 (mc	onthly expenses for Deb	tor 2), if any, from Official Form 1	06J-2.	\$	0.00
			d 22b. The result is you	22.	\$	1,565.00	
23.	Calcu	ılate your mont	hly net income.				
	23a.	Copy line 12 (y	our combined monthly	income) from Schedule I.	23a.	\$	1,765.20
	23b.	Copy your mor	nthly expenses from line	22 above.	23b.	-\$	1,565.00
	23c.		monthly expenses from our <i>monthly net income</i> .		23c.	\$	200.20
24.	•	•		your expenses within the year a			
	mortg	age payment to	increase or decrease b	ecause of a modification in the te	ms of your mortgage?		
	×	No.					
		Yes. Explain	here:				

Fill in this information to identify your case:							
Debtor 1	Joel First Name	Junior Middle Name	MunizJr.				
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name				
	Bankruptcy Court for		District of Ohio				
Case number (If known)	r				Check if this is an amended filing.		

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Part 1: Summarize Your Assets	
	Your assets Value of what you own
Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$ \$7,470.00
1b. Copy line 62, Total personal property, from Schedule A/B	\$13,520.00
1c. Copy line 63, Total of all property on Schedule A/B	\$ 40,990.00
Part 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
 Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D 	\$0.00
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$ 537.50
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+\$20,299.00
Your total liabilities	\$20,836.50
Part 3: Summarize Your Income and Expenses	
4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$1,765.20
Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22, Column A, of Schedule J	\$1,565.00

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

eb	tor 1	Joel First Name	Junior Middle Name	Muniz Jr. Last Name	Case numb	ber (if known)	
Pa	rt 4:	Answer These	Questions for Adminis	trative and Statistical Records			
6.			uptcy under Chapters 7 hing to report on this pa	, 11, or 13? art of the form. Check this box and s	submit this form to the co	ourt with your oth	er schedules.
7.	_	kind of debt do	•				
				bts. Consumer debts are those "ing \$ 101(8). Fill out lines 8-10 for statistics.			sonal,
	Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.						
8.				nly Income: Copy your total current 1; OR , Form 122C-1 Line 14.	monthly income from O	fficial	\$2,436.00
9.	Сору	the following sp	pecial categories of cl	aims from Part 4, line 6 of <i>Sched</i>	ule E/F:		
					Total cl	laim	
	Fror	m Part 4 on Sch	edule E/F, copy the fo	llowing:			
	9a. Do	omestic support o	obligations (Copy line 6	a.)	\$	537.50	
	9b. Ta	axes and certain	other debts you owe the	e government. (Copy line 6b.)	\$	0.00	
	9c. Cla	aims for death or	personal injury while y	ou were intoxicated. (Copy line 6c.)	\$	0.00	
	9d. St	udent loans. (Co	py line 6f.)		\$	0.00	
		bligations arising iority claims. (Co		eement or divorce that you did not	report as \$	0.00	
	9f. De	ebts to pension o	r profit-sharing plans, a	and other similar debts. (Copy line 6	th.) + \$	0.00	

Official Form 106Sum

9g. Total. Add lines 9a through 9f.

537.50

II in this info	rmation to identify	your case:			
Debtor 1	Joel First Name	Junior Middle Name	MunizJr. Last Name		
Debtor 2 Spouse, if filing)	First Name	Middle Name	Last Name		
ited States	Bankruptcy Court fo	or the: Northern	District of Ohio		
ase number f known)					

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you pay or agree to pay someone who	is NOT an attorney to help you fill out bankruptcy forms?
No Yes. Name of person	. Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
Under navelty of pariting I declare that I had	and the common and school less filed with this deployation and that
they are true and correct.	ave read the summary and schedules filed with this declaration and that
X/S/ Joel Junior Muniz Jr.	X
Signature of Debtor 1	Signature of Debtor 2
Date	Date MM/DD/YYYY

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

Fill in this info	rmation to identify	your case:			
Debtor 1	Joel First Name	Junior Middle Name	MunizJr. Last Name		
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name		
United States	Bankruptcy Court fo	or the: Northern	District of Ohio		
Case number (If known)	·				Check if this is amended filing

Statement of Financial Affairs for Individuals Filing for Bankruptcy

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

2. Duri				
	Debtor 1:	Dates Debtor 1 lived there	Debtor 2:	Dates Debtor 2 lived there
	Number Street City State ZIP Code	From To	Same as Debtor 1 Number Street City State ZIP Code	Same as Debtor 1 From To
stat	es and territories include Arizona, California, Ida	From To spouse or legal equival sho, Louisiana, Nevada,	Same as Debtor 1 Number Street City State ZIP Code lent in a community property state or territory? New Mexico, Puerto Rico, Texas, Washington, and	Same as Debtor 1 From To (Community property d Wisconsin.)
	No Yes. Make sure you fill out Schedule H: Your C	Codebtors (Official Form	106H).	

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Page 1

Case number	(if	known
-------------	-----	-------

	First Name Middle N	ame Last Name			
Part 2	2: Explain the Sources of Y	our Income			
Fil ac	id you have any income from er II in the total amount of income you ctivities. If you are filing a joint cas ander Debtor 1.	ou received from all jobs and all be	usinesses, including part-tim	е	lendar years?
[X	- 110				
		Debtor 1		Debtor 2	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	From January 1 of current yountil the date you filed for bankruptcy:	Wages, commissions, bonuses, tips Operating a business	\$	☐ Wages, commissions, bonuses, tips☐ Operating a business	\$
	For last calendar year: (January 1 to December 31, 2	Wages, commissions, bonuses, tips Operating a business	\$ 30,000.00	☐ Wages, commissions, bonuses, tips☐ Operating a business	\$
	For the calendar year before (January 1 to December 31, 2	commissions,	\$28,210.00	☐ Wages, commissions, bonuses, tips ☐ Operating a business	\$
Ind ur ga		ner that income is taxable. Examp nefit payments; pensions; rental i u are filing a joint case and you h	oles of other income are aliminome; interest; dividends; reave income that you receive	money collected from law d together, list it only on	vsuits; royalties; and
		Debtor 1		Debtor 2	
		Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)
	From January 1 of current y until the date you filed for bankruptcy:	ear ————————————————————————————————————	\$ \$		\$ \$
			\$		\$
	For last calendar year:		\$		\$
	(January 1 to December 31,		\$		\$
	Y	<u>—</u>	\$		\$
			\$		¢

Case number (if known)

Part 3:	List Certain	Payments Y	ou Made Before Y	ou Filed for Bank	ruptcy		
1. Ar e	either Debtor 1's	or Debtor 2	a's debts primaril	y consumer deb	its?		
	"incurred by	an individual	primarily for a per	rsonal, family, or I	ebts. Consumer debts are household purpose."		1(8) as
	•		u filed for bankrup	tcy, did you pay a	any creditor a total of \$6,42	5* or more?	
	☐ No. Go to	o line 7.					
	the	total amount h as child su	you paid that cred	ditor. Do not inclu	\$6,425* or more in one or de payments for domestic ude payments to an attorne	support obligations,	
	* Subject to adju	stment on 4/	01/19 and every 3	years after that f	or cases filed on or after th	e date of adjustment.	
×	Yes. Debtor 1 or	Debtor 2 or	both have prima	rily consumer de	ebts.		
	During the 90 da	ys before yo	u filed for bankrup	tcy, did you pay a	any creditor a total of \$600	or more?	
	🗷 No. Go to	o line 7.					
	that	creditor. Do	not include payme	ents for domestic	\$600 or more and the tota support obligations, such a ey for this bankruptcy case	as child support and	
				Dates of payment	Total amount paid	Amount you still owe	Was this payment for
					\$	\$	☐ Mortgage
	Creditor's Name						☐ Car
	Number Street						☐ Credit card
							☐ Loan repayment
					•		Suppliers or vendors
	City	State	ZIP Code				☐ Other
					\$	\$	☐ Mortgage
					—	<u> </u>	- □ Car
	Creditor's Name			-			☐ Credit card
							Loan repayment
	Number Street						☐ Suppliers or vendors
							☐ Other
	City	State	ZIP Code				
							_
					\$	\$	☐ Mortgage
	Creditor's Name				•		☐ Car
							☐ Credit card
	Number Street						Loan repayment
							☐ Suppliers or vendors ☐ Other
							Other
	City	State	ZIP Code				

Debtor 1	Joel	Junior	Muniz Jr.		Case numbe	r (Ir known)	
	First Name	Middle Name	Last Name				
<i>Insi</i> corp mar	iders include your reporations of which yonaging agent, include port obligations, sur	rou filed for bankruptcy elatives; any general partr ou are an officer, director ding one for a business you ch as child support and a	ners; relatives of any g r, person in control, or ou operate as a sole pr	eneral partners; pa owner of 20% or m	artnerships of which nore of their voting	h you are a general partner; securities; and any	
	Yes. List all payme	ents to an insider.					
			Dates of payment	Total amount paid	Amount you still owe	Reason for this payment	
				\$	\$		
	Insider's Name			Φ	Φ		
	Number Street						
	City	State 7ID Cod					
	City	State ZIP Cod	e 				
	Insider's Name			\$	\$		
	Number Street						
	City	State ZIP Cod	e e				
ben Incli	nefited an insider? ude payments on d No	ou filed for bankruptcy, ebts guaranteed or cosignents that benefited an insi	ned by an insider.		er any property o	on account of a debt that	
			Dates of payment	Total amount paid	Amount you still owe	Reason for this payment	
						Include creditor's name	
	Insider's Name		<u> </u>	\$	\$		
	Number Street						
	City	State ZIP Cod	<u>e</u>				
	Insider's Name			\$	\$		
	Number Street						
	-						

Debtor 1	Joel First Name	Junior Middle Name	Muniz Jr. Last Name	Case numbe	er (if known)	
List	hin 1 year before	ncluding personal injury c	, were you a party in any l	awsuit, court action, or admi divorces, collection suits, paterr		
	No Yes. Fill in the de	tails.				
		_	Nature of the case	Court or agency		Status of the case
	Case title			Court Name		— ☐ Pending ☐ On appeal
	Case number			Number Street City	State ZIP Code	─ L Concluded
-	Case title			Court Name		— ☐ Pending ☐ On appeal
	Case number			Number Street City	State ZIP Code	— □ Concluded
Che	-	nd fill in the details below. 11.		repossessed, foreclosed, g	Date	Value of the property
	Creditor's Name	e				_ \$
	Number Stre	pet	Explain what happe	ned		
	City	State ZIP Co	Property was Property was Property was	repossessed. foreclosed.		
			Describe the prope	rty	Date	Value of the property
	Creditor's Name					_ \$
	Number Stre	eet	Explain what happe	ened		
	City	State ZIP Co	Property was Property was Property was	foreclosed.		

☐ Property was attached, seized, or levied.

First Name	Middle Name	Last Name		
Within 90 days before vo	ou filed for bankrupte	cy, did any creditor, including a bank or financial institutio	on, set off any am	ounts from
		because you owed a debt?	, oot on any am	
× No				
Yes. Fill in the details	S.			
		Describe the action the creditor took	Date action was	Amount
			taken	
Creditor's Name				
Newshar Otract		_		\$
Number Street				
		_		
			_	
City	State ZIP Code	Last 4 digits of account number: XXXX–		
		, was any of your property in the possession of an assign	ee for the benefit	of
	nted receiver, a custo	odian, or another official?		
× No				
Yes				
List Cartain Cif	ts and Contributions			
5: List Certain Gif	ts and Contributions			
▼ No Yes. Fill in the details Gifts with a total value	for each gift.	Describe the gifts	Dates you gave	Value
per person		· ·	the gifts	
Person to Whom You Gav	and the Oill			\$
Person to whom You Ga	ve the Gift			
				\$
Number Street				
City	State ZIP Code			
Person's relationship	to you			
-				
Gifts with a total value per person	ue of more than \$600	Describe the gifts	Dates you gave the gifts	Value
F 2. F 2. 55.				
				\$
Person to Whom You Gar	ve the Gift			Ψ
				\$
Number Street				
Hambor Ottoot				
City	State ZIP Code			
Oity	State ZIF COUR			

Debtor 1

Joel

Junior

Muniz Jr.

Case number (if known)

	First Name	Middle Name	Last Name		
cha	rity?	ou filed for bankru	uptcy, did you give any gifts or contributions	with a total value of more than \$6	600 to any
×	No Yes. Fill in the detail	ls for each gift or co	ontribution.		
	Gifts or contribution that total more that		Describe what you contributed	Date you contributed	Value
	Charity's Name				- \$ - \$
	Number Street		<u> </u>		
	City	State ZIP Cod	<u> </u>		
Part 6:	List Certain	Losses			
	No Yes. Fill in the detai Describe the prope the loss occurred	ls. erty you lost and how	Describe any insurance coverage for the loss Include the amount that insurance has paid. List claims on line 33 of Schedule A/B: Property.	loss	Value of property lost
					- \$
yοι	hin 1 year before you consulted about s	eeking bankruptcy ankruptcy petition p	ptcy, did you or anyone else acting on your b or or preparing a bankruptcy petition? reparers, or credit counseling agencies for service		y to anyone
	Jeffrey J. Horvath	1	Description and value of any property transfe	erred Date payment or transfer was made	Amount of payment
	Person Who Was Paid 306 Clinton S Number Street		Payment for bankruptcy petition preparation	on <u>12/18/18</u>	_ \$1,150.00
	Defiance City	OH 43512 State ZIP Code	 _		- \$
	jeff@horvathlawo Email or website addre	office.com	<u> </u>		
	Person Who Made the	Payment, if Not You	_		

Debtor 1

Joel

Junior

Muniz Jr.

Case number (if known)

otor 1	Joel	Junior	M						
	First Name	Middle Name	Las	st Name					
			Descri	ption and value of a	any property tra	nsferred	Date payment or	Amou	nt of paymer
	Person Who Was Paid			priori aria varao or c	any proporty are		transfer was made	7111104	in or paymor
	r stoott tittle trae r ala								
	Number Street							¢	
								Φ_	
			-					\$	
	City	State ZIP Code	1						
	Email or website addres								
	Email of website addres	55							
	Person Who Made the F	Payment, if Not You							
		•							
<u> </u>	ot include any paym No ⁄es. Fill in the detail		t you listed or	n line 16.					
			Descripti	on and value of any	y property trans	ferred	Date payment or	Amou	nt of payme
	Person Who Was Paid		-				transfer was made		
İ	Number Street		_					\$	
								\$	
•			_					\$	
/ithi	City in 2 years before y ferred in the ordin					nsfer any prope	erty to anyone, other	_	property
Vithi rans nclud rope ☑ N	in 2 years before y ferred in the ordin de both outright tran erty). Do not include	ou filed for bankr lary course of you lasfers and transfers gifts and transfers s.	ur business of smade as sees that you have	or financial affair curity (such as the earceady listed or on and value of pro	es? e granting of a n this statemer	security interest	or mortgage on your	r than	
/ithinans	in 2 years before y iferred in the ordin de both outright tran erty). Do not include No Yes. Fill in the detail Person Who Received Tra	ou filed for bankr lary course of you listers and transfers gifts and transfers s. State ZIP Code	ur business of simade as se si that you have Descripti	or financial affair curity (such as the earceady listed or on and value of pro	es? e granting of a n this statemer	security interest	or mortgage on your	r than	Date transfe
/ithinans	In 2 years before y Iferred in the ordin Ide both outright tran Ide	ou filed for bankr lary course of you listers and transfers gifts and transfers s. State ZIP Code	ur business of simade as se si that you have Descripti	or financial affair curity (such as the earceady listed or on and value of pro	es? e granting of a n this statemer	security interest	or mortgage on your	r than	Date transfe
Vithians	in 2 years before y iferred in the ordin de both outright tran erty). Do not include No Yes. Fill in the detail Person Who Received Tra Number Street City Person's relationship to	ou filed for bankr lary course of you listers and transfers gifts and transfers s. State ZIP Code	ur business of simade as se si that you have Descripti	or financial affair curity (such as the earceady listed or on and value of pro	es? e granting of a n this statemer	security interest	or mortgage on your	r than	Date transf

	First Name Middle Na	ame	Last Name			
19	. Within 10 years before you filed beneficiary? (These are often c			operty to a self-settle	ed trust or similar device of wh	nich you are a
×	No Yes. Fill in the details.					
			Description and value of the p	property transferred		Date transfer was made
	Name of trust					
Part 8	List Certain Financial Acco	ounts, Instr	ruments, Safe Deposit Box	es, and Storage Ur	iits	
be Ind	ithin 1 year before you filed for kenefit, closed, sold, moved, or traclude checking, savings, money okerage houses, pension funds,	ansferred? market, or	other financial accounts;	certificates of depo	osit; shares in banks, credit	
	Yes. Fill in the details.				_	
			Last 4 digits of account number	Type of account instrument	or Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
	Name of Financial Institution		XXXX-	☐ Checking ☐ Savings		\$
	Number Street			☐ Money ma		
	City State ZIP	Code		☐ Brokerage		
			Last 4 digits of account number	Type of account instrument	or Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
	Name of Financial Institution		XXXX-	☐ Checking		\$
	Number Street			☐ Savings ☐ Money ma		
	City State ZIP	Code		☐ Brokerage ☐ Other		
	o you now have, or did you have curities, cash, or other valuable	-	ear before you filed for bar	nkruptcy, any safe o	deposit box or other deposit	tory for
	•					
			Who else had access to it?	D	escribe the contents	Do you still have it?
	Name of Financial Institution		Name			☐ No ☐ Yes
	Number Street		Number Street			
	City State ZIP	Code	City State	ZIP Code		

Debtor 1

Joel

Junior

Muniz Jr.

Case number (if known)

No □ Yes.	ou stored property Fill in the details.		Last Name			
☐ Yes.	Fill in the details	in a storage unit of	or place other than your i	home within 1 yea	ar before you filed for bankruptcy?	
	Fill in the details					
N	. Fill in the details.					
Non			Who else has or had acces	ss to it?	Describe the contents	Do you
kI						still have it?
k1						
Name	e of Storage Facility					☐ No
			Name			L res
Numb	oer Street		Number Street			
			Number Street			
			City Stat	te ZIP Code		
City	Stat	te ZIP Code				
						_
Part 9:	Identify Property	/ You Hold or Con	trol for Someone Else			
22 Do vou l	hold or control any	nroporty that car	noono also awns? Includ	lo any proporty vo	ou borrowed from, are storing	
-	old in trust for som		leone else owns: illeidd	e any property yo	d borrowed from, are storing	
⊠ No						
	. Fill in the details.					
			Where is the property?		Describe the property	Value
					The state of the state of	1
Owne	er's Name		Number Street			\$
Numb	per Street					
			City State	ZIP Code		
City	Stat	te ZIP Code				
Part 10:	Give Details Abo	out Environmental	Information			
rait iv.	Give Details ADO	out Environmental	illiorillation			
For the pur	pose of Part 10, the	e following definit	ons apply:			
■ Environ	mental law means a	any federal, state,	or local statute or regula	ation concerning p	pollution, contamination, releases of	
	ous or toxic substar		naterial into the air, land,		ar aroundwater or other medium	
hazardo						
hazardo	g statutes or regula	ations controlling	the cleanup of these sur	ostances, wastes,		
hazardo includin Site mea	ig statutes or regula ans any location, fa	acility, or property	as defined under any en	vironmental law,		
hazardo includin Site mea	ig statutes or regula ans any location, fa	acility, or property	•	vironmental law,	or material.	
hazardo includin Site mea utilize it Hazardo	ng statutes or regula ans any location, fa or used to own, op ous material means	acility, or property perate, or utilize it, anything an envii	as defined under any en including disposal sites	ivironmental law, v s. s a hazardous was	or material.	
hazardo includin Site mea utilize it Hazardo	ng statutes or regula ans any location, fa or used to own, op ous material means	acility, or property perate, or utilize it, anything an envii	as defined under any en including disposal sites	ivironmental law, v s. s a hazardous was	or material. whether you now own, operate, or	
hazardo includin Site mea utilize it Hazardo substan	ng statutes or regula ans any location, fa or used to own, op ous material means ace, hazardous mate	acility, or property perate, or utilize it, anything an envi erial, pollutant, co	as defined under any en including disposal sites	vironmental law, v s. s a hazardous was m.	or material. whether you now own, operate, or ste, hazardous substance, toxic	
hazardo includin Site mea utilize it Hazardo substan	ng statutes or regula ans any location, fa or used to own, op ous material means ace, hazardous mate	acility, or property perate, or utilize it, anything an envi erial, pollutant, co	as defined under any en including disposal sites conmental law defines as ntaminant, or similar ter	vironmental law, v s. s a hazardous was m.	or material. whether you now own, operate, or ste, hazardous substance, toxic	
hazardo includin Site mea utilize it Hazardo substan Report all n	ng statutes or regula ans any location, fa or used to own, op ous material means ace, hazardous mate notices, releases, an	acility, or property perate, or utilize it, anything an envinerial, pollutant, co nd proceedings th	as defined under any en including disposal sites ronmental law defines as intaminant, or similar termatyou know about, rega	ivironmental law, v s. s a hazardous was m. irdless of when th	or material. whether you now own, operate, or ste, hazardous substance, toxic	
hazardo includin Site mea utilize it Hazardo substan Report all n	ng statutes or regula ans any location, fa or used to own, op ous material means ace, hazardous mate notices, releases, an	acility, or property perate, or utilize it, anything an envinerial, pollutant, co nd proceedings th	as defined under any en including disposal sites ronmental law defines as intaminant, or similar termatyou know about, rega	ivironmental law, v s. s a hazardous was m. irdless of when th	or material. whether you now own, operate, or ste, hazardous substance, toxic ey occurred.	
hazardo includin Site mea utilize it Hazardo substan Report all n 24. Has any	ng statutes or regular ans any location, far or used to own, op ous material means ace, hazardous mater notices, releases, and governmental unit	acility, or property perate, or utilize it, anything an envinerial, pollutant, co nd proceedings th	as defined under any en including disposal sites ronmental law defines as intaminant, or similar termatyou know about, rega	ivironmental law, v s. s a hazardous was m. irdless of when th	or material. whether you now own, operate, or ste, hazardous substance, toxic ey occurred.	
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Debtor 1

Joel

Junior

Muniz Jr.

Case number (if known)

Date of notice
ents and orders.
nents and orders.
*! *! *!
Status of the case
Case
☐ Pending
☐ On appeal
☐ Concluded
Concluded
to any business?
number
Security number or ITIN.
Го
Го
ro
ro
ro
ro

Debtor 1

Joel

Junior

Muniz Jr.

Case number (if known)

Statement of Financial Affairs for Individuals Filing for Bankruptcy

tor 1	Joel	Junior	Muniz Jr.	
	First Name	Middle Name	Last Name	
_			Describe the nature of the business	Employer Identification number
			Describe the nature of the business	Do not include Social Security number or ITIN.
	Business Name		-	
	Dusiness Name			EIN: –
	Number Street		_	
	Trumbor Street		Name of accountant or bookkeeper	Dates business existed
•			-	_
	City	State ZIP Code	_	From To
	Oity	Otate Zii Gode		
×	itutions, creditors, No Yes. Fill in the det	·	Date issued	
	News		_	
	Name			
	Number Street		MM / DD / YYYY	
	City	State ZIP Code	_	
: 12: I	: Sign Below	wers on this <i>Statem</i>		nts, and I declare under penalty of perjury that the
: 12: I a fr 1:	Sign Below have read the ansurers are true are read in connection	wers on this <i>Statem</i> nd correct. I underst with a bankruptcy 341, 1519, and 3571.	and that making a false statement, concea case can result in fines up to \$250,000, or	ling property, or obtaining money or property by
12: I a fr 1	Sign Below have read the ansonswers are true are raud in connection 8 U.S.C. §§ 152, 13 (S/ Joel Junio Signature of Debto	wers on this <i>Statem</i> nd correct. I underst n with a bankruptcy 341, 1519, and 3571. or Muniz Jr.	and that making a false statement, conceacase can result in fines up to \$250,000, or	ling property, or obtaining money or property by
12: I a fr 1:	Sign Below have read the ansonswers are true around in connection 8 U.S.C. §§ 152, 13 /S/ Joel Junion Signature of Debtor Date 03/20/2019	wers on this <i>Statem</i> nd correct. I underst in with a bankruptcy of 341, 1519, and 3571.	and that making a false statement, conceacase can result in fines up to \$250,000, or Signature of Debtor 2	ling property, or obtaining money or property by imprisonment for up to 20 years, or both.
1 12: I a a fr	Sign Below have read the ansonswers are true around in connection 8 U.S.C. §§ 152, 13 /S/ Joel Junion Signature of Debtor Date 03/20/2019	wers on this <i>Statem</i> nd correct. I underst in with a bankruptcy of 341, 1519, and 3571.	and that making a false statement, conceacase can result in fines up to \$250,000, or Signature of Debtor 2	ling property, or obtaining money or property by
I aa fr 11	Sign Below have read the ansonswers are true around in connection 8 U.S.C. §§ 152, 13 /S/ Joel Junion Signature of Debtor Date 03/20/2019	wers on this <i>Statem</i> nd correct. I underst in with a bankruptcy of 341, 1519, and 3571.	and that making a false statement, conceacase can result in fines up to \$250,000, or Signature of Debtor 2	ling property, or obtaining money or property by imprisonment for up to 20 years, or both.
t 12:	Sign Below have read the ansunswers are true are raud in connection 8 U.S.C. §§ 152, 13 /S/ Joel Junic Signature of Debto Date 03/20/2019 Did you attach addi No Yes	wers on this <i>Statem</i> nd correct. I underst with a bankruptcy of 341, 1519, and 3571. Or Muniz Jr. Or 1	and that making a false statement, conceacase can result in fines up to \$250,000, or Signature of Debtor 2	ling property, or obtaining money or property by imprisonment for up to 20 years, or both. uals Filing for Bankruptcy (Official Form 107)?

Fill in this information to identify your case:							
Debtor 1	Joel First Name	Junior Middle Name	MunizJr. Last Name				
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name				
United States	Bankruptcy Court for	or the: Northern	District of Ohio				
Case number (If known)						Check amen	

Statement of Intentions for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

List Your Creditors Who Hold Secured Claims Part 1: 1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Hold Claims Secured by Property (Official Form 106D), fill in the information below. Identify the creditor and the property that is collateral What do you intend to do with the property that Did you claim the secures a debt? property as exempt on Schedule C? ☐ Surrender the property. Creditor's name: □ No Retain the property and redeem it. ☐ Yes Description of property securing Retain the property and enter into a debt: Reaffirmation Agreement. Retain the property and [explain]: __ ☐ Surrender the property. □ No Creditor's name: ☐ Retain the property and redeem it. ☐ Yes Description of property securing Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]: ___ ☐ Surrender the property. Creditor's name: □ No Retain the property and redeem it. ☐ Yes Description of property securing Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]: ___ ☐ Surrender the property. Creditor's name: ☐ No Retain the property and redeem it. ☐ Yes Description of property securing Retain the property and enter into a debt: Reaffirmation Agreement. Retain the property and [explain]: __

Official Form 108

Statement of Intentions for Individuals Filing Under Chapter 7

Joel	Junior	Muniz Jr.	Case number (if known)	
First Name	Middle Neme	Loot Nama	-	

Part 2:	List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired personal property leases

Will the lease be assumed?

aca. Toa may assume an anexpirea persona	ar property reace in the tractice accents accum-	7 tt. 1 1 010101 3 000(p)(2)1
Describe your unexpired personal propert	y leases	Will the lease be assumed?
Lessor's name:		□ No
Description of leased property:		☐ Yes
Lessor's name:		□ No
Description of leased property:		☐ Yes
Lessor's name:		□ No
Description of leased property:		☐ Yes
Lessor's name:		□ No
Description of leased property:		☐ Yes
Lessor's name:		□ No
Description of leased property:		☐ Yes
Lessor's name:		□ No
Description of leased property:		☐ Yes
Lessor's name:		□ No
Description of leased property:		☐ Yes
3: Sign Below		
nder penalty of perjury, I declare that I have ersonal property that is subject to an unexp	e indicated my intention about any property of pired lease.	my estate that secures a debt and any
/S/ Joel Junior Muniz Jr.	_ *	
ignature of Debtor 1	Signature of Debtor 2	
Date <u>03/20/2019</u> MM / DD / YYYY	Date	

Official Form 108

Statement of Intentions for Individuals Filing Under Chapter 7

Fill	in this	infor	mation to iden	tify your case:							one box o 22A-1Sup		as directed i	n this for	m and in
Deb	tor 1	Joel First N		Junior Middle Name	MunizJr.				×	1.	There is a	no _l	presumption o	f abuse.	
(Spc	tor 2 buse, if filing ed State	g) First N		Middle Name	Last Name District of	Ohio State)				2.	of abuse	app est	tion to determin plies will be ma Calculation (C	ade under	Chapter 7
Cas	e numbe	er	(If known)							3.			Fest does not ap tary service but		
<u>O</u>	fficia	al Fo	orm 122 <i>P</i>	<u>\-1</u>						С	heck if th	is i	is an amende	ed filing	
CI	hapt	ter :	7 Statem	ent of Your	Curre	nt Mo	nthly	/ Inc	ome						12/15
nee writ con (Of	ded, at te your sumer ficial F	tach a name debts	separate sheet and case numb	s possible. If two marrie to this form. Include th per (if known). If you be qualifying military servi ith this form.	ne line num lieve that y	ber to whou are ex	ich the a empted f	ddition	al inform	ation	applies. C f abuse be	On t	the top of any use you do no	additional t have prir	pages, narily
Pai	rt 1:	Calc	ulate Your Cu	rrent Monthly Income											
1. V	Vhat is	your	marital and fili	ing status? Check one	only.										
	×	Not r	married. Fill out	t Column A, lines 2-11.											
			_	pouse is filing with yo											
		_	_	pouse is NOT filing w	-	_	-								
			Living in the	same household and	are not leg	gally sepa	arated. F	ill out b	oth Colur	mns	A and B, lii	nes	; 2-11.		
			under penalty	ately or are legally sep of perjury that you and ing apart for reasons th	your spous	se are leg	ally sepa	rated u	nder non	bank	ruptcy law	tha	at applies or th	at you and	
11 l moi am	U.S.C. othly incount mo	§ 101(come ore tha	(10A). For exam varied during th an once. For exa	come that you receive nple, if you are filing on the 6 months, add the ind ample, if both spouses tite \$0 in the space.	September come for al	r 15, the 6 I 6 month	6-month բ s and div	period vide the	vould be I total by 6 e income	Marc 6. Fill from	h 1 through in the result that proper that proper that proper that proper than A	h A ult.	Nugust 31. If the Do not include	e amount e any incor n only. If y	of your ne
,	Vour o	uross :	wanee ealary	tips, bonuses, overtir	me and co	mmissio	ne			Debto	or 1		non-filing s		
۷.			ayroll deduction		ne, and co)IIIIII1133IC	1115		\$		2,436.00	\$		0.00	
3.			d maintenance lumn B is filled	payments. Do not inclin.	ude payme	ents from	a		\$		0.00	\$	i	0.00	
	expens regular your de	ses of r contr epend	f you or your d ibutions from ar ents, parents, a	rce which are regularl lependents, including n unmarried partner, me and roommates. Include not filled in. Do not inclu	child suppembers of year regular co	port. Inclu our hous intribution	ude ehold, s from a				0.00			0.00	
5.	Net inc	come	from operating	g a business, professi	on, or farn Debtor 1		tor 2								
	Ordina Net mo	ry and		eductions) erating expenses business, profession, or	- \$ <u> </u>	0.00 \$ 0.00 \$	0.00	Сору							
	farm	como	from rontal an	d other real property	\$	0.00 \$	0.00	here →			0.00			0.00	
0.	MEC III	COITIE	nom rentar an	d other real property	Debtor 1		tor 2								
			ts (before all de	•		0.00 \$	0.00								
		-		erating expenses ntal and other real	- \$	0.00 \$	0.00	Сору							
	proper	•			\$	0.00 \$	0.00	here →			0.00			0.00	
7.	Interes	st, div	idends, and ro	yalties					\$		0.00	\$		0.00	

Chapter 7 Statement of Your Current Monthly Income

Debtor 1 Joel Junior Muniz Jr. Case number (if known)											
		First Name	Middle Name	Last Name							
							Column A Debtor 1	1	Column B Debtor 2 or non-filing spouse		
8.	Unem	ployment comp	ensation			\$	0.00	\$	0.00		
	under t	the Social Secur	nt if you contend that thitty Act. Instead, list it he	ere:	Ψ			_			
	•			· -	0.00						
9.			t income. Do not includ	de any amount r		\$	0.00	\$	0.00		
10.	Income amoun payme interna	t. Do not include nts received as a tional or domest	sources not listed ab e any benefits received a victim of a war crime, ic terrorism. If necessa the total on line 10c.	under the Social a crime agains	al Security Act or the humanity, or	Ψ	0.00	Ψ_	0.00		
	10a.					\$	0.00	\$_	0.00		
	10b.				_	\$	0.00	\$_	0.00		
	10c.	Total amounts f	from separate pages, if	any.	-	+\$	0.00	+_	0.00		
11.			urrent monthly incom d the total for Column A			\$	2,436.00	+\$_	0.00	=\$	2,436.00
											tal current onthly income
Pa	rt 2:	Determine W	hether the Means Tes	st Applies to Yo	ou						
12.	Calcul	ate your curren	t monthly income for	the year. Follo	w these steps:						
	12a.	Copy your total	current monthly incom	e from line 11			С	opy lii	ne 11 here 🕇 12	2a. \$	2,436.00
		Multiply by 12 (the number of months i	in a year).							X 12
	12b.	The result is yo	ur annual income for th	nis part of the fo	rm				12	2b.\$	29,232.00
13.	Calcul	ate the median	family income that ap	pplies to you. F	follow these steps:						
		Fill in the state	in which you live.		ОН						
		Fill in the numb	er of people in your ho	usehold.	2						
		Fill in the media	an family income for you	ur state and size	e of household				1	3. \$	59,565.00
			applicable median inconis list may also be avai				ecified in the se	eparate	e instructions		_
14.	How d 14a. 14b.	no presur	pare? is less than or equal to inption of abuse. Go to lis is more than line 13. Or is determined by Form	Part 3. n the top of pag	e 1, check box 2, <i>T</i>	he pre	sumption				'
Pa	rt 3:	Sign Below									
ı u		ŭ	e, I declare under penal	ty of perjury tha	t the information or	this s	tatement and i	n any	attachments is tr	rue and o	correct
					х			•			
		Signature of Debt	inior Muniz Jr.				e of Debtor 2				=
	Dete		03/00/0040		Data						
	Date		03/20/2019 MM / DD / YYYY		Date		MM	/ DD /	YYYYY		_
			line 14a, do NOT fill ou line 14b, fill out Form 2								

Official Form 122A-1

Chapter 7 Statement of Your Current Monthly Income

United States Bankruptcy Court Northern District Of Ohio

In re	e	Joel	Junior Muniz	Case No.	
Deb	tor			Chapter	7
		DISCLOSU	RE OF COMPENSAT	TION OF ATTORNEY FO	R DEBTOR
á	lebtor igreed	(s) and that comp I to be paid to me	ensation paid to me within o	016(b), I certify that I am the attorn ne year before the filing of the peti be rendered on behalf of the debtor :	ition in bankruptcy, or
F	For le	gal services, I hav	e agreed to accept	\$	800.00
F	Prior t	o the filing of this	s statement I have received	\$	750.00
F	Balano	ce Due		\$	50.00
2. 1	Γhe so	ource of the comp	ensation paid to me was:		
		Debtor	☐ Other (specify):		
3. 7	The s	ource of compe	nsation to be paid to me is	s:	
		Debtor	☐ Other (specify):		
4.	×	_	eed to share the above-dis pers and associates of my	sclosed compensation with any law firm.	other person unless
		are not member	ers or associates of my lav	sed compensation with another w firm. A copy of the agreement ompensation, is attached.	
		urn for the above uptcy case, incl		reed to render legal service for a	all aspects of the
a			otor's financial situation, a etition in bankruptcy;	nd rendering advice to the debto	or in determining
	o. Pruired	•	ing of any petition, schedu	ules, statements of affairs and p	lan which may be
(presentation of journed hearing		of creditors and confirmation he	earing, and any

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR (Continued)

d. Representation of the debtor in adv	ersary proceedings and other contested bankruptcy matters;
e. [Other provisions as needed]	
6. By agreement with the debtor(s), th	e above-disclosed fee does not include the following services:
	CERTIFICATION
•	ng is a complete statement of any agreement or arrangement for on of the debtor(s) in this bankruptcy proceedings.
payment to me for representant	of the debtor(s) in this bankruptey proceedings.
03/20/2019	/S/ Jeffrey J. Horvath
Date	Signature of Attorney
	Law Office of Jeffey J. Horvath
	Name of law firm

CECILIA LOPEZ

EDGERTON, OH 43517

CHASTITY POLANCO

DEFIANCE, OH 43512

CREDIT COLLECTION SERVICE PO BOX 607 NORWOOD, MA 02062

DFAS DE/FYDC 8899 EAST 56TH ST. INDIANAPOLIS, IN 46249-3300

FIFTH-THIRD BANK
39 FOUNTAIN SQUARE PLAZA
CINCINNATI, OH 45263

NAVY FEDERAL CREDIT UNION PO BOX 3700
MERRIFIELD, VA 22119-3700

USAA SAVINGS BANK 10750 MCDERMOTT FWY SAN ANTONIO, TX 78288-1600